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FORM D U.S. SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL OMB NUMBER: 3235-0076 Washington, D.C. 20549 SEC Mail Processing Expires: April 30, 2008 MANUALLY Section

EXECUTE BY 16 2008 Estimated average burden FORM D hours per response . . 16.00 NOTICE OF SALE OF SECURITIES SEC USE ONLY Washington, DC PURSUANT TO REGULATION D, Prefix | Serial SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (check if this is an amendment and name has changed, and indicate change.) TRISHIELD DISTRESSED SECURITIES FUND LLC Filing Under (Check box(es) that apply): Rule 506 Rule 504 Rule 505 Section 4(6) Type of Filing: ■ New Filing A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) TRISHIELD DISTRESSED SECURITIES FUND LLC Telephone Number Address of Executive Offices (Number and Street, City, State, Zip Code) (Including Area Code) (646) 717-4155 30 West 15th Street, No. 7S, New York, New York 10011 Address of Principal Business Operations Telephone Number (Number and Street, City, State, Zip Code) (if different from Executive Offices) (Including Area Code) Brief Description of Business **PROCESSED**

Securities Investment

Type of Business Organization

business trust

corporation

Actual or Estimated Date of Incorporation or Organization:

limited partnership, already formed

limited partnership, to be formed Month

Year [0|2]

[0|8]

Actual A

Estimated

other (please specify THOMSON REUTERS Limited Liability Company

MAY 222008

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

[D][E]

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: <u>Five (5) copies</u> of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Executive Officer Director Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Trishield Partners LLC Business or Residence Address (Number and Street, City, State, Zip Code) 30 West 15th Street, No. 7S, New York, New York 10011 General and/or Beneficial Owner Executive Officer ☐ Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Buick Jr., Alan Jeffrey Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trishield Partners LLC, 30 West 15th Street, No. 7S, New York, New York 10011 Director General and/or Check Box(es) that Apply: Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: ☐ Director General and/or Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. 11	NFORM	ATION	ABOUT	OFFER	RING				
ì.	Has the	issuer sold	, or does the	issuer inte	nd to sell t	o non-accre	dited inves	tors in this	offering?			•		Yes No
•.	7125 010	15500: 5010	, or uses the	issues inte		r also in Ap								
2.	What is	tha minim				•	-		_					*\$ <u>1,000,000</u>
2.				ent that wil	i be accepte	a irom any	individuai	(***************************************				************	31,000,000
		um may be												Yes No
3.			ermit joint											
4.	solicitati dealer re persons	ion of purc gistered w of such a b	on requested hasers in co ith the SEC proker or dea	nnection w and/or with	ith sales of h a state or	securities in states, list tl	n the offerin he name of	ng. If a pers the broker	son to be lis or dealer. I	sted is an as f more than	sociated pe	rson or age	nt of a brok	er or
Full Nam	e (Last na	me first, if	individual)											
Business	or Resider	nce Addres	s (Number a	and Street,	City, State,	Zip Code)	<u>,,</u>					•		
Name of	Associate	d Broker o	Dealer											
States in	Which Per	rson Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers	Į.							
(Check			individual :			(CO)	ICT1	(DE)	IDCI			[HI]	[ID]	All States
	[AL] [IL]	[AK] [IN]	(AZ) [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[MS]	[MÓ]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[UJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last na	me first, if	individual)											
Business	or Resider	nce Addres	s (Number a	and Street,	City, State,	Zip Code)						·		
Name of	Associated	d Broker o	r Dealer			······································			···					
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	Purchasers	;		·			.		,
(Check	"All States	s" or check	individual :	States)								• • • • • • • • • • • • • • • • • • • •		All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] (MI)	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	(OH) [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam			individual)	[114]	[1V]	[01]	[41]	[vn]	[#A]	[***]	[1,1,1]	[***1]	[7.1]	
Business	or Reside	nce Addres	s (Number a	and Street,	City, State,	Zip Code)							·	
Name of	Associated	d Broker o	r Dealer										-	

States in	Which Per	rson Listed	Has Solicite	ed or Inten	ds to Solici	Purchasers	•							_
(Check			individual 5				<i>t</i> ∕~T"	(DE)	וואסי	rei i	1	,	(1rs)	🔲 All States
	[AL]	[AK] [IN]	(AZ) (IA)	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	(DE) [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[H[] [MS]	[ID] [MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Type of Security	Aggregate Offering Price	Amount Already Sold
	•	
Debt	\$	\$
Equity	\$	\$
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Limited Liability Company Interests*	\$100,000,000	\$9,400,813
Total*	\$ <u>100,000,000</u>	\$ <u>9,400,813</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	5	\$ <u>9,325,813</u>
Non-accredited Investors		\$ <u>75,000</u>
Total (for filings under Rule 504 only)	<u> </u>	\$
Answer also in Appendix, Column 4, if filing under ULOE.		
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505	Security	\$
Regulation A		\$
-		\$
KHR: 304		Ψ
Rule 504 Total		\$
Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		\$ \$ 0
Total		
Total		\$0
Total		\$ <u>0</u> \$ <u>0</u>
Total		\$ 0 \$ 0 \$ 40,000 \$ 0
Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees		\$ 0 \$ 0 \$ 40,000 \$ 0
Total		\$0 \$0 \$_40,000 \$0 \$0

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

^{*} This is a continuous offering. Therefore, the aggregate offering price could be greater than or less than this amount.

4								
1	C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND U	SE OF PROCE	EDS				
•	b. Enter the difference between the aggregate offerin Question 1 and total expenses furnished in response to is the "adjusted gross proceeds to the issuer."	o Part C - Question 4.a. This difference		*\$ <u>99,950,000</u>				
5.	Indicate below the amount of the adjusted gross procedure used for each of the purposes shown. If the amount an estimate and check the box to the left of the estimate must equal the adjusted gross proceeds to the issuer states above.							
			Payments to Officers, Directors, & Affiliates	Payments To Others				
	Salaries and fees		□\$	□ \$				
	Purchase of real estate		□ \$	□ \$ □ \$				
	Purchase, rental or leasing and installation of machine		□ \$					
	Construction or leasing of plant buildings and facilities		□ \$	□ \$				
	Acquisition of other businesses (including the value of that may be used in exchange for the assets or securiti merger)	ies of another issuer pursuant to a	□ \$	□\$				
	Repayment of indebtedness		□ \$	□\$				
	Working capital	••••••	□ \$ <u> </u>	□ \$				
	Other (specify): to be used as described in Issuer's Co Memorandum		□\$	∑ \$99,950,000				
	Column Totals		□\$	∑ \$ <u>99,950,000</u>				
	Total Payments Listed (column totals added)	*⊠ \$ <u>99,950,000</u>						
	D. FEDERAL SIGNATURE							
followi	uer has duly caused this notice to be signed by the un ng signature constitutes an undertaking by the issuer of its staff, the information furnished by the issuer to a	to furnish to the U.S. Securities and E	xchange Commis	ssion, upon written				
Issuer (P	int or Type)	Signature	Date					
TRISE	HELD DISTRESSED SECURITIES FUND LLC		May	9 ,2008				
Name of	Signer (Print or Type)	Title of Signer (Print or Type)	11					
Alan Je	ffrey Buick Jr.	Managing Member of Trishield Partners LLC, Managing Member of Issuer						

See asterisked comment on p.4.

END

ATTENTION
Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)